

TABLE A16.—Experiments concerning the effect of the inhalation of cigarette smoke or its constituents upon the respiratory tract of animals (cont.)
 (Figures in parentheses represent total number survivors in specific group)

Author, year, country, reference	Animal and strain	A. Type of exposure B. Duration C. Material	Results				Comments
			Number of animals dead at 540 days	Daily average exposure (cigarettes)	Histologic findings in dead animals		
Dontenwill and Wiebecke, 1966, Germany (77).	Golden hamsters. C. — E. 320	A. Chamber. B. Up to 4 cigarettes per day for up to 2 years. C. Cigarette smoke.	40 40 80 143	1 2 1-2 1-4	8/ 40 MET des 8/ 40 MET des 44/ 80 MET des (3 MET bronch, 2 PAP trach) 67/143 MET des (13 MET bronch, 8 PAP trach)	MET des = desquama- tive metaplasia. MET bronch = bron- chial papillary metaplasia. PAP trach = tracheal papilloma or intense tracheal metaplasia.	
Leuchtenberger and Leuchten- berger 1966, Switzerland (164).	CF ₁ mice.	A. Chamber. B. Up to 1,000 hours. C. Cigarette smoke, exposure to in- fluenza virus (PR8).			Marked transgression	†Epithelial tissues of these animals showed an increased frequency of cellular atypism. The authors concluded that PR8 influenza virus may act as a cofactor in malig- nant transformation.	
					Marked squamous cell metaplasia (percent)	Marked dysplasia (percent)	Marked parenchyma (percent)
			Controls (100):				
			Male	—	—	—	
			Female	—	—	—	
			Smoke exposed (59):				
			Male	—	6.0	3.0	
			Female	—	—	—	
			Virus exposed (59):				
			Male	11.0	21.0	13.0	
			Female	—	—	5.0	
			Smoke and virus exposed (68):				
			Male	9.0	43.0	†18.0	
			Female	29.0	54.0	†33.0	

TABLE A16.—*Experiments concerning the effect of the inhalation of cigarette smoke or its constituents upon the respiratory tract of animals (cont.)*
 (Figures in parentheses represent total number survivors in specific group)

Author, year, country, reference	Animal and strain	A. Type of exposure B. Duration C. Material	Results						Comments
			Squamous	Hyperplasia	metapla-	sia with	Pre-	Carcin-	
			inflammation	atypical	atypical	features	cancerous	oma	
Rockey and Speer, 1966, U.S.A. (223).	Mongrel dogs: C. 11. E. 19.	A. Tracheal fenestration (10). Nostril inhalation (9). B. Tracheal fenestration—284 treatment days. Nostril inhalation—180 treatment days. C. Cigarette smoke.	Controls (11)	9	1	1	0	0	†Carcinoma <i>in situ</i> noted in 5 separate sites in this animal.
		Tracheal fenestration (10)	10	5	6	1	1	0	
		Nostril inhalation (9)	6	0	0	0	0	0	
Auerbach et al., 1967, U.S.A. (10).	Beagle dogs: C. 10 (2 with tracheostoma). E. 10.	A. Tracheostoma. B. Up to 12 cigarettes per day for up to 421 days. C. Cigarette smoke.	Controls, experimental:	No histologic change in bronchial epithelium: a. 1 animal died at 24 days and no histologic change noted. b. 5 animals sacrificed at 421 days and nuclear atypism noted in all. c. 2 animals died at 229 and 278 days and nuclear atypism was noted but of lesser severity than in those sacrificed at 421 days.					
Harris and Negroni, 1967, England (121).	C57BL mice: C. 200. E. 1,437.	A. Chamber. B. Smoke—12 cigarettes per 20 mice for 12 minutes every other day for lifetime. C. Cigarette smoke, influenza virus aerosol, benzpyrene aerosol.	Treatment	Number	Number of lung carcinomas		This strain of mice is noted for its lack of spontaneous lung tumor formation.		
		Controls	200	0		Animals exposed to cigarette smoke showed no hyperplastic epithelial changes such as those noted by Leuchtenberger.			
		Influenza aerosol alone	682	15					
		Benzpyrene aerosol (4 exposures)	200	2					
		Smoking	200	8 (all adenocarcinomas)					
		Influenza and benzpyrene	200	3					
		Influenza and smoking	155	3					

TABLE A16.—*Experiments concerning the effect of the inhalation of cigarette smoke or its constituents upon the respiratory tract of animals (cont.)*
 (Figures in parentheses represent total number survivors in specific group)

Author, year, country, reference	Animal and strain	A. Type of exposure B. Duration C. Material	Results	Comments
Wynder et al., 1968, U.S.A. (327).	Male C57BL6 mice: C. and E.— more than 40.	A. Chamber. B. Up to 315 cigarettes. C. Cigarette smoke, nitrogen dioxide, volatile acids and aldehydes found in ciga- rette smoke, swine influenza virus.	Conclusions:† No squamous cell respiratory cancer noted. This is attributed to the limitation of inhalation time (CO and nicotine acute effects) and to the anatomically and physiologically intricate nasal passage defense system. Exposure to cigarette smoke, NO ₂ , or volatile acids and aldehydes leads to reactive hyperplasia and metaplasia, both of which were noted to be reversible. Swine influenza virus exposure produced hyperplastic and metaplastic effects which could not be enhanced by subsequent exposure to cigarette smoke.	†Results not provided in tabular form.
Laskin et al., 1970, U.S.A. (159).	Rats: C. 45. E. 3.	A. Chamber. B. 1 hour per day for up to 690 days. C. Benzo(a)pyrene aerosol, SO ₂ atmosphere (3.5 p.p.m.).	Exposure Atmosphere controls Atmosphere plus benzo(a)- pyrene exposure SO ₂ controls SO ₂ plus benzo(a)- pyrene exposure	Number 3 21 3 21 Squamous cell carcinomas 0/ 3 2/21 0/ 3 5/21
Hammond et al., 1970, U.S.A. (119).	Beagle dogs.	See text	See text.	

TABLE A21.—Outline of retrospective studies of tobacco use and cancer of the larynx

Author, year, country, reference	Sex	Number	Cases		Controls		Collection of data
			Method of selection	Number	Method of selection	Number	
Schreck et al., 1950, U.S.A. (246).	M.	73	Referrals from V.A. hospitals in "entire midwest" to V.A. Cancer Center, Hines, Illinois, during 1942-44; patients with larynx-pharynx tumors clinically or histologically diagnosed:	522	From same set of referrals, patients with tumors other than lip, lung, larynx-pharynx:		Random sample of 5,003 admissions; questionnaires from Hines referrals for 1942-44; records included smoking history.
					Percent	Percent	
			Nonsmokers	13.7	Nonsmokers	23.9	
			Cigarettes	79.5	Cigarettes	59.2	
			Cigars	3.7	Cigars	10.0	
			Pipes	6.8	Pipes	11.5	
Valko, 1952, Czechoslovakia (292).	M-F	226	Clinic patients with cancer of the larynx:	108	Clinic patients of same age group with other diagnoses:		Medical history and questionnaire in clinic.
					Percent	Percent	
			Nonsmokers	7.5	Nonsmokers	22.2	
			Cigarettes	83.2			
			Cigars	4.4			
			Pipes	10.6			
Sadowsky et al., 1953, U.S.A. (232).	M.	273	White male admissions to hospitals in New York City, Missouri, New Orleans, Chicago; patients with diagnosed laryngeal tumors, 1938-43:	615	From same set of admissions, patients with illnesses other than cancer:		Sample of 2,605 out of 2,847 interviews (including smoking history) by trained lay interviewers.
					Percent	Percent	
			Nonsmokers	4.0	Nonsmokers	13.2	
			Cigarettes only	60.1	Cigarettes only	53.3	
			Cigars only	2.2	Cigars only	3.4	
			Pipe only	4.8	Pipe only	7.0	
			Some combination	28.9	Some combination	23.1	

TABLE A21.—Outline of retrospective studies of tobacco use and cancer of the larynx (cont.)

Author, year, country, reference	Sex	Number	Cases		Controls		Collection of data
				Method of selection	Number	Method of selection	
Blümlein, 1955, Germany (26).	M.	241	Clinic patients with cancer of larynx: <i>Percent</i>		200	Patients with no laryngeal disease: <i>Percent</i>	Personal history taken in clinic. Patients and controls over 40 years of age.
			Nonsmokers	0.8		Nonsmokers	18.0
			Heavy smokers	79.3		Heavy smokers	4.3
			Inhalers	95.0		Inhalers	17.0
Wynder et al., 1956, U.S.A. (912).	M.	209	White male inpatients Memorial Cancer Research Center during 1952 to 1954, with benign or malignant epidermoid tumors of larynx: <i>Percent</i>		209	Patients with other than epidermoid cancer, individually matched controls in same institutions: <i>Percent</i>	Trained lay interviewers.
			Nonsmokers	0.5		Nonsmokers	10.5
			Cigarettes	86.0		Cigarettes	73.7
			Cigars	7.5		Cigars	10.1
			Pipes	5.0		Pipes	3.8
			Cigars/pipes	1.0		Cigars/pipes	1.9
Wynder et al., 1956, India (912).	M.	132	Laryngeal cancer patients at Tata Memorial Hospital, 1952-54: <i>Percent</i>		132	Controls individually matched as for U.S.A. data above: <i>Percent</i>	Interviews for smoking and medical histories.
			Nonsmokers	13.6		Nonsmokers	30.3
			Bidis	78.8		Bidis	62.1
			Cigarettes	5.3		Cigarettes	4.5
			Hookah	1.5		Hookah	0.8
			Chillum	0.8		Chillum	2.3
Schwartz et al., 1957, France (248).	M.	121	Patients hospitalized from 1954 through 1956 with laryngeal cancer, in Paris and other large cities: <i>Percent</i>		242	Same time and sources; patients hospitalized for non-cancerous conditions or trauma: <i>Percent</i>	Cases and controls individually matched within institutions; each member of a set questioned by the same trained lay interviewer.
			Smokers	96		Smokers ($p<0.05$)	84
			Inhalers	68		Inhalers ($p<0.05$)	47
			Roll their own cigarettes	44		Roll their own cigarettes	31

TABLE A21.—Outline of retrospective studies of tobacco use and cancer of the larynx (cont.)

Author, year, country, reference	Cases				Controls		Collection of data
	Sex	Number	Method of selection		Number	Method of selection	
Wynder et al., 1957, Sweden (322).	M.	60	Patients at Radiumhemmet with squamous-cell cancer of larynx, from 1952 through 1955:		271	Patients from same source and time, with cancer other than squamous-cell of larynx:	
				Percent		Percent	
			Nonsmokers	5		Nonsmokers	24
			Cigarettes	47		Cigarettes	36
			Cigars	17		Cigars	9
			Pipes	15		Pipes	16
			Mixed	17		Mixed	13
Wynder et al., 1958, Cuba (325).	M.	142	Clinic patients in Havana during 1956-57, with histologically diagnosed epidermoid cancer of larynx.		220	Same source and time; apparently patients with cancers other than larynx, lung, or oral cavity, matched for age:	
	F.	32			214		
				Percent		Percent	
				Male	Female	Male	Female
			Nonsmokers	1	13	Nonsmokers	16
			Cigarettes	62	72	Cigarettes	45
			Cigars	20	6	Cigars	22
			Pipes	1	..	Pipes	1
			Mixed	16	9	Mixed	16
Dutta-Choudhuri et al., 1959, India (86).	M-F	582	Patients in Calcutta cancer hospital during 1950-54, with laryngeal tumor diagnosed and confirmed by biopsy or smear:		288	Not specified	
				Percent		Percent	
			Nonusers	14.1		Nonusers	41.7
			Cigarettes or bidi	77.8		Cigarettes or bidi	52.1
			Chew	3.1		Chew	3.8
			Both	5.0		Both	2.4

TABLE A21.—Outline of retrospective studies of tobacco use and cancer of the larynx (cont.)

Author, year, country, reference	Sex	Number	Cases		Controls		Collection of data
			Method of selection	Number	Method of selection	Number	
Staszewski, 1960, Poland (259).	M.	207	Patients admitted to chronic disease hospital during 1957 and 1958 with histologically confirmed squamous-cell carcinoma of the larynx:	912	Patients admitted during 1957 and 1958 to chronic disease center for cancerous and noncancerous conditions presumably not related to tobacco consumption:	1,813	Author interviewed patients suspected of lung cancer for smoking history and background.
	F.	13					
			<i>Percent</i>		<i>Percent</i>		
			Nonsmokers	0.5	Nonsmokers	17.3	
			Cigarettes only	87.9	Cigarettes only	60.5	
			Pipes and/or cigars	1.9	Pipes and/or cigars	11.1	
			"Heavy smokers"	88.4	"Heavy smokers"	49.0	
			Inhalers	96.1	Inhalers	66.8	
			Female smokers	30.8	Female smokers	8.4	
Rozenbelds, 1967, Australia (229).	M.	191	Patients admitted to 3 major hospitals with cancer of larynx and hypopharynx:		No controls.		Patient interviews.
	F.	21					
			<i>Percent</i>				
			Nonsmokers	8			
			Smokers	92			
			Heavy smokers	30			
Terracol et al., 1967, France (274).	M.	961	Private service and clinic patients of ENT hospital:		No controls.		Patient interviews.
			<i>Percent</i>				
			Nonsmokers	12.1			
			Smokers	87.9			
Svoboda, 1968, Czechoslovakia (271).	M.	205	Patients admitted to a regional hospital over a period of 6 years all confirmed histologically:	320	Male controls		Cases: patient interviews. Controls: not stated.
	F.	10					
			<i>Percent</i>				
			Nonsmokers	2.93	Nonsmokers	22.0	
			Cigarettes	94.63	Cigarettes (approximately)	71.0	
			Pipes	2.44	Pipes (approximately)	7.0	

TABLE A22.—*Summary of results of retrospective studies of**tobacco use and cancer of the larynx*

(Figures in parentheses represent ratios based on less than 5 case nonsmokers.)

Investigator reference	Relative risk ratio ¹ all smokers to nonsmokers
Schrek et al., U.S.A. (246)	2.0
Valko, Czechoslovakia (292)	3.5
Sadowsky et al., U.S.A. (232)	3.7
Blümlein, Germany (26)	27.5
Wynder et al., U.S.A. (312)	23.6
Wynder et al., India (312)	3.1
Schwartz et al., France (248)	4.6
Wynder et al., Sweden (322)	6.0
Wynder et al., Cuba (325)	(18.9) (males only)
Dutta-Choudhuri et al., India (86)	4.3
Staszewski, Poland (259)	(40.0) (males only)
Svoboda, Czechoslovakia (271)	8.8

¹ Computed according to method of Cornfield, J. (61).

TABLE A23.—Number and percent distribution by relative frequency of atypical nuclei
among true vocal cord cells, of men classified by smoking category
(100 percent atypical cells defined as carcinoma)

Percent atypical nuclei	Current cigarette smokers											
	Never smoked regularly		Ex-cigarette smokers		Cigar/pipe smokers		Less than 1 pack a day		1-2 packs a day		2 or more packs a day	
	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent
Total	88	100.0	116	100.0	94	100.0	125	100.0	329	100.0	190	100.0
None	66	75.0	86	74.1	1	1.1	1	.8	0	—	0	—
Less than 50	8	9.1	14	12.1	4	4.3	25	20.0	4	1.2	0	—
50-59	10	11.4	13	11.2	50	53.0	54	43.2	87	26.4	29	15.3
60-69	4	4.5	1	.9	23	24.5	21	16.8	116	35.3	75	39.4
70-79	0	—	2	1.7	9	9.6	9	7.2	44	13.4	38	20.0
80-89	0	—	0	—	2	2.1	2	1.6	19	5.8	11	5.8
90-99	0	—	0	—	1	1.1	0	—	5	1.5	0	—
100:												
Carcinoma <i>in situ</i>	0	—	0	—	3	3.2	13	10.4	52	15.8	35	18.4
Invasive carcinoma	0	—	0	—	1	1.1	0	—	2	.6	2	1.1

Source: Auerbach, O. et al. (9).

TABLE A24.—*Number and percent distribution, by highest number of cell rows in the basal layer of the true vocal cord, of men classified by smoking category*

Number of cell rows	Current cigarette smokers											
	Never smoked regularly		Ex-cigarette smokers		Cigar/pipe smokers		Less than 1 pack a day		1-2 packs a day		2 or more packs a day	
Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	
Total	88	100.0	116	100.0	94	100.0	125	100.0	329	100.0	190	100.0
Less than 5 cell rows	30	34.1	7	6.0	4	4.3	3	2.4	1	0.3	0	...
5 cell rows	29	33.0	27	23.3	20	21.3	27	21.6	38	11.6	20	10.5
6 cell rows	8	9.1	15	12.9	15	6.0	25	20.0	51	15.4	24	12.6
7 cell rows	6	6.8	12	10.3	18	19.1	12	9.6	38	11.6	19	10.0
8 cell rows	8	9.1	14	12.1	9	9.6	13	10.4	30	9.1	23	12.1
9 cell rows	1	1.1	7	6.0	7	7.4	6	4.8	26	7.9	14	7.4
10 or more cell rows	6	6.8	34	29.4	21	22.3	39	31.2	145	44.1	90	47.4

Source: Auerbach, O. et al. (9).

TABLE A28.—Outline of retrospective studies of tobacco use and cancer of the oral cavity
(Data obtained from patient interview and other sources)

Author, year, country, reference	Sex	Cases		Controls		Comments
		Number	Method of selection	Number	Method of selection	
Borders, 1920, U.S.A. (43).	M.	526	Series of clinic patients with epithelioma of the lip:	500	Series of clinic patients without epithe- lioma of the lip: <i>Percent</i>	
	F.	11			Tobacco users 80.5 Smokers 75.1 Cigarettes 0.9 Chewers 24.0 Pipes 59.0 Cigars 38.5	Tobacco users 78.6 Smokers 75.2 Cigarettes 44.4 Chewers 18.4 Pipes 28.6 Cigars 44.0
Ebenius, 1943, Sweden (87).	M.	439	Clinic patients with cancer of the lip:	300	Not defined.	† Estimate of prevalence of use.
	F.	33			 <i>Percent</i> <i>Male Female</i> Tobacco users 79.7 — Tobacco users (all pipes) — 57.6 Pipes 61.8 — Chew or use snuff 47.4 — Cigars and cigarettes ... 12.9 —	 <i>Percent</i> <i>Male Female</i> Tobacco users 68.7 — Tobacco users — †1-2 Pipes 22.9 — Chew or use snuff 60.7 — Cigars and cigarettes .. 32.5 —
Levin et al., 1950, U.S.A. (169).	M.	143	Cancer Institute patients with cancer of the lip:	51	Cancer Institute patients with non-can- cer diseases of same site: <i>Percent</i>	
					Smokers 84.5 Cigarettes 45.3 Pipes 48.1 Cigars 26.5	Smokers 74.0 Cigarettes 43.0 Pipes 30.7 Cigars 34.9

TABLE A28.—Outline of retrospective studies of tobacco use and cancer of the oral cavity (cont.)
(Data obtained from patient interview and other sources)

Author, year, country, reference	Sex	Number	Cases		Controls		Comments
				Method of selection		Method of selection	
Mills and Porter, 1950, U.S.A. (186).	M.	124	Deaths from cancer of oral cavity in Cincinnati and Detroit, 1940-45 and 1942-46 respectively:		185	Sample of population of Columbus, Ohio, in same proportion of color, sex, and age as in cases:	
				Percent		Percent	
			Cigarettes only	35.5	Cigarettes only	32.4	
			Pipes, cigars, or combinations	54.8	Pipes, cigars, or combinations	29.7	
Moore et al., 1953, U.S.A. (193).	M.	112	Patients over 50 years old since 1951 with cancer of oral cavity:		38	Patients of same age groups with benign oral lesions or benign surgical conditions:	
				Percent		Percent	
			Chewers	58.0	Chewers	31.6	
			Pipes	42.0	Pipes	47.4	
			Cigars and cigarettes	38.4	Cigars and cigarettes	52.6	
Sadowsky et al., 1953, U.S.A. (232).	M.	1,136	Hospital patients with lip, oral, and pharyngeal cancer, 1938-43:		615	Patients with illness other than cancer:	
				Percent		Percent	
			Cigarettes only	42.3	Cigarettes only	53.3	
			Cigars only	4.0	Cigars only	3.4	
			Pipes only	17.8	Pipes only	7.0	
			Mixed	28.2	Mixed	23.1	
Sanghvi et al., 1955, India (241).	M. F.	657 81	Hospital patients with cancer of oral cavity and pharynx:		288 112	Hospital patients with diseases other than cancer:	
				Percent		Percent	
			Male Female			Male Female	
			Smoke and chew	38.8 3.7		Smoke and chew	24.0 —
			Smoke only	46.7 6.2		Smoke only	50.0 6.3
			Chew only	11.7 64.2		Chew only	8.7 23.2
			Neither	2.7 25.9		Neither	17.3 70.5

TABLE A28.—Outline of retrospective studies of tobacco use and cancer of the oral cavity (cont.)
(Data obtained from patient interview and other sources)

Author, year, country, reference	Sex	Cases			Controls			Comments	
		Number	Method of selection		Number	Method of selection			
Ledermann, 1955, France (162).	M.	240	Patients with cancer of oral cavity and pharynx:		62	Patients with cancer of skin, bone, and muscle:		Differences between cases and controls for both high and low alcohol intake are insignificant when smoking is controlled.	
				Percent			Percent		
			Nonsmokers	4.6		Nonsmokers	17.2		
			>20 cigarettes per day	23.4		>20 cigarettes per day	18.6		
Wynder et al., 1957, U.S.A. (313).	M.	543	Patients with cancer of oral cavity:		207	Patients with cancer of other sites and benign diseases:			
	F.	116			232				
				Percent			Percent		
				Male	Female		Male	Female	
			Nonsmokers	3	47		Nonsmokers	10	70
			Cigars	20	—		Cigars	13	—
			Pipes	11	—		Pipes	6	—
			Mixed	8	—		Mixed	8	—
			Chew	17	—		Chew	8	—
			Cigarettes	57	53		Cigarettes	63	30
			>35 cigarettes per day	29	—		>35 cigarettes per day	17	—
			>16 cigarettes per day	—	34		>16 cigarettes per day	—	11
Schwartz et al., 1957, France (248).	M.	332	Hospital patients with cancer of oral cavity and pharynx:		608	Hospital patients with non-cancer illness and accident cases, matched by age:			
				Percent			Percent		
			Nonsmokers	16.4		Nonsmokers	23.4		
			Cigarettes only	62.7		Cigarettes only	58.2		
			Pipes only	3.3		Pipes only	3.0		

TABLE A28.—Outline of retrospective studies of tobacco use and cancer of the oral cavity (cont.)
 (Data obtained from patient interview and other sources)

Author, year, country, reference	Sex	Cases				Controls				Comments
		Number		Method of selection		Number		Method of selection		
Wynder et al., 1957, Cuba (325).	M.	178	Hospital clinic patients with cancer of oral cavity and pharynx:			220		Patients in same clinics with non-malignant conditions, matched by sex and age:		
	F.	34				214				
				<i>Percent</i>				<i>Percent</i>		
				<i>Male</i>				<i>Male</i>		
				Nonsmokers	4	24		Nonsmokers	16	66
				Cigarettes				Cigarettes		
				predominantly	45	62		predominantly	45	27
				Cigars predominantly .	33	12		Cigars predominantly .	22	6
Wynder et al., 1957, Sweden (322).	M.	115	Male patients with cancer of oral cavity and pharynx:			115		Male patients in same hospital with can- cer of sites other than oral, pharynx, larynx, lung, esophagus, breast:		Alcohol data significant only for hypopharynx.
				<i>Percent</i>				<i>Percent</i>		
				Cigarettes	36.5			Cigarettes	36	
				Cigars	13.0			Cigars	9	
				Pipes	12.2			Pipes	16	
				Mixed	15.7			Mixed	13	
Peacock et al., 1960, U.S.A. (210).	M.	25	Hospital patients with oral cancer:			74		Patients in same hospital without oral cancer and 117 male and 100 female out-patients, randomly selected.		
	F.	20				72				
				<i>Percent</i>				<i>Percent</i>		
				Cewed or used snuff over 20 years (all patients)	55.6					
Staszewski, 1960, Poland (259).	M.	383	Male patients with oral cancer:			912		Male patients with other cancerous and non-cancerous conditions:		
				<i>Percent</i>				<i>Percent</i>		
				Nonsmokers	5.7			Nonsmokers	17.3	
				"Heavy" smoking index	72.8			"Heavy" smoking index	49.0	
				Cigarettes only	72.3			Cigarettes only	60.5	
				Pipes and/or cigars	12.8			Pipes and/or cigars	11.1	

TABLE A28.—Outline of retrospective studies of tobacco use and cancer of the oral cavity (cont.)
 (Data obtained from patient interview and other sources)

Author, year, country, reference	Sex	Cases			Controls			Comments
		Number	Method of selection		Number	Method of selection		
Vogler et al., 1962, U.S.A. (298).	M.	188	Clinic patients with cancer of lip and oral cavity:		521	Patients of same clinic with other cancer or non-malignant conditions:		† Due to varying tabular treatment of data, percentages of tobacco users are not all based on the same number of cases.
	F.	92			1,064			
			<i>Percent</i>			<i>Percent</i>		
			<i>Male</i>	<i>Female</i>		<i>Male</i>	<i>Female</i>	
			Chewers	32.9	—			
			Excessive chewers	22.9	—			
			Snuff dippers	—	72.0	Snuff dippers	—	† 6.1
			Excessive snuff dippers	—	41.3			
			Tobacco users	90.0	90.0	Tobacco users	56.0	56.0
Vincent and Marchetta, 1963, U.S.A. (297).	M.	66	Successive patients with lesions of buccal cavity and oropharynx:		100	Successive patients attending gastrointestinal clinic, age-matched:		Male patients used considerably more alcohol than male controls.
	F.	16			50			Data refers to all forms of smoking expressed as cigarette equivalents.
			<i>Percent</i>			<i>Percent</i>		Cigarette equivalents: 1 cigar = 5 cigarettes 1 pipe = 2 cigarettes
			<i>Oral</i>	<i>Oro-</i>				† BN=Betel nut.
			<i>Cavity pharynx</i>					
			Males:					
			Nonsmokers	3.0	—	27.0		
			<20 cigarettes per day	18.3	15.1	24.0		
			>20 cigarettes per day	78.7	84.9	49.0		
			Females:					
			Nonsmokers	55.5	28.6	82.0		
			<20 cigarettes per day	—	—	8.0		
			>20 cigarettes per day	44.5	71.4	10.0		

TABLE A28.—Outline of retrospective studies of tobacco use and cancer of the oral cavity (cont.)
(Data obtained from patient interview and other sources)

Author, year, country, reference	Sex	Number	Cases			Controls			Comments
			Method of selection			Method of selection			
Shanta and Krishnamurthi, 1964, India (258).	M.	552	Patients with oral and pharyngeal cancer	300					Controls residing in same area matched for age, sex, and class:
	F.	206	(unsure of confirmation):	100					
						Buccal	Anterior	Posterior	
						Lip	mucosa	tongue	Pharynx Males
			Males:						
			No tobacco habit	—	2.0	7.2	2.0	5.3	89.1
			Smokers	50.0	45.7	66.6	75.0	72.8	52.7
			Number of cases	(12)	(293)	(69)	(48)	(130)	(300)
									Females
			Females:						
			No tobacco habit	14.3	11.0	33.3	—	40.0	88.8
			Smokers	—	4.7	5.5	—	8.8	—
			Number of cases	(7)	(152)	(18)	(4)	(25)	(100)
Wahid et al., 1965, India (302).	M.	589	Patients with oral and pharyngeal car- cinoma:	589		Patients matched for age, sex, religion, and social class.			
	F.	232		232					
						Percent	Percent		
			Nonsmokers	.....	9.62		66.5		
			Smokers	.....	17.05		21.2		
			Chewers (Betel nut)	.....	35.44		5.9		
			Both	.....	37.88		6.4		
Hirayama, 1966, Central and South East Asia (124).	M.	369	Patients with oral and pharyngeal carci- noma:	277		Patients with other (unspecified) dis- eases:			Found only a suggestive association between alcohol-drinking and oral cancer in non- chewers only.
	F.	176		163					
						Percent	Percent		
						Male	Female		
			Nonusers	.....	1.6	2.5	17.0	33.0	
			Smokers	.....	17.1	2.5	23.8	1.2	
			Smokers, †BN and tobacco chewers	....	46.7	6.6	24.9	1.8	† BN-Betel nut.

TABLE A28.—Outline of retrospective studies of tobacco use and cancer of the oral cavity (cont.)
 (Data obtained from patient interview and other sources)

Author, year, country, reference	Sex	Number	Cases		Controls		Comments
			Method of selection	Number	Method of selection	Number	
Keller, 1967, U.S.A. (140).	M.	408	Patients with squamous cell carcinoma of oral cavity and oropharynx confirmed histologically. Three New York City VA Hospitals 1953-68:	408	Next male patient admitted to same hos- pital within 5 year age range.		Excessive alcohol con- sumption noted for cases involving floor, mesopharynx, and tongue. Findings indicate the association of heavy drinking with cancer independent of the amount of tobacco used.
			Percent		Percent		
			Nonusers	5.1	14.2		
			Cigarettes	68.6	56.4 ($p < 0.0001$)		
			Pipe only	4.0	2.9		
			Cigar only	6.9	6.1		
Martinez, 1969, Puerto Rico (183).	M. F.	38	Patients with epidermoid carcinoma of oral cavity and pharynx:	345 114	115 male and 38 female hospital or clinic patients without cancer; 330 male and 76 female residents of same region, age and sex matched.		Cases found to consume more alcoholic bever- ages than controls.
			Percent		Percent		
			Nonsmokers	13.7	19.2		
			Heavy tobacco users	24.8	12.2 ($p < 0.0001$)		
Keller, 1970, U.S.A. (141).	M.	304	Patients with primary basal or squamous cell carcinoma of lip:	304	Patients from same hospital matched for age and race.		
			Percent		Percent		
			Nonsmokers	7.3	16.6 ($p < 0.001$)		
			Cigarettes only	60.2	52.8		
			Pipe only	6.0	3.4		
			Pipe, other	6.8	0.4 ($p < 0.01$)		

TABLE A28a.—Summary of results of retrospective studies of smoking by type and oral cancer of detailed sites

Author reference	Cigarettes	Cigarettes and cigars	Bidis	Pipes only	Pipes and other forms	Cigars only	Tobacco chewing	Betel nut chewing	Miscellaneous
Broders (43)	Lip (-)			Lip (+)		Lip (-)	Lip (+)		
Ebenius (87)				Lip (-)	Lip (+)		Lip (-)		
Levin et al. (169)	Lip (-)			Lip (+)		Lip (*)			
Mills and Porter (180)	Oral (*)								Pipes and cigars combined—oral (+).
Moore et al. (193)	Lip, mouth (-)			Lip, mouth (-)		Lip, mouth (-)		Snuff—lip, mouth (+).	
Sadowsky et al. (232)	Lip, tongue, other oral, pharynx (-)			Lip, tongue, other oral (+)		Tongue, other oral (*)			
Sanghvi et al. (241)		Oral (+)				Oral (+)			If smokers and chewers—base of tongue, hypopharynx (+).
Lederman (162)	Oral (+)								
Wynder et al. (313)	Floor of mouth Male (*) Female (+)			Each site except tongue (+)		Each site (+)	Gingiva, lip (*)		
Schwartz et al. (248)		Pharynx (+)		Oral (-)					

TABLE A28a.—Summary of results of retrospective studies of smoking by type and oral cancer of detailed sites (cont.)

Author reference	Cigarettes	Cigarettes and cigars	Bidis	Pipes only	Pipes and other forms	Cigars only	Tobacco chewing	Betel nut chewing	Miscellaneous
Wynder et al. (325)	Oral and pharynx, Male (-) Female (+)				Oral and pharynx, Male (+), Female (+)				
Wynder et al. (328)	Pharynx (+), other sites (-).				Tongue, gingiva, pharynx (+).			Pipes and cigars combined—tongue (+).	
Peacock et al. (210)					Oral (+)¹			Snuff—oral (+)¹	
Staszewski (259)	Lip, oral cavity (+)....							Pipes and cigars combined—lip, oral cavity (*).	
Vogler et al. (298)							All forms combined (+), Female (+) Snuff—lip and buccal cavity in both cases.		
Vincent and Marchetta (297)							All forms combined—oral (+), pharynx (+).		
Shanta and Krishnamurthi (256)						Lip, buccal mucosa (+)...	All smoking types—pharynx (+), post tongue (+). All forms combined—lip, oral cavity, pharynx (+).		

TABLE A28a.—*Summary of results of retrospective studies of smoking by type and oral cancer of detailed sites (cont.)*

Author reference	Cigarettes	Cigarettes and cigars	Bidis	Pipes only	Pipes and other forms	Cigars only	Tobacco chewing	Betel nut chewing	Miscellaneous
Wahi et al. (302)	Anterior tongue and buccal mucosa, Males (+)	.....	.....	.....	.....	.....	.....	Anterior tongue and buccal mucosa, Males (+)	All forms combined—all sites (+).
Hirayama (124)	.....	All sites (—)	.....	All sites (—)	.....	All sites (—)	.....	.....	All forms combined—base of tongue (+), oropharynx (+). Smoking only combined —buccal mucosa (+).
Keller (140)	All sites (+)	.....	All sites (—)	.....	All sites (—)	.....	.....	.....	All types smoking combined, heavy —floor of mouth and tongue (+).
Martinez (183)	Oral cavity, pharynx (+)	.....	.....	.....	.....	.....	.....	.....	All types of smoking, heavy, combined—oral cavity (+), pharynx (+).
Keller (141)	Lip (—)	.....	.....	Lip (+)	Lip (—)	.....	.....	.....	All types of smoking combined—lip (+).

¹ Only in individuals of low economic status and over 60 years old.

Symbols: (+) = significant association.

(—) = association absent or not significant.

(*) = association of doubtful significance.

TABLE A29.—*Experimental studies concerning oral carcinogenesis*

Author, year, country, reference	Animal and strain	A. Method. B. Frequency and/ or duration. C. Material.	Results				
Kreshover, 1952, U.S.A. (152).	78 Swiss and C57 mice.	A. Painting of lower lip mucocutaneous region. B. 10 times in 76 days. C. Cigarette smoke "concentrate".	No macroscopic or microscopic changes in controls or experimental animals.				
Salley, 1954, U.S.A. (238).	36 Syrian hamsters.	A. Painting of cheek pouch. B. 3 per week for 16 weeks. C. Benz(a) pyrene in acetone or benzene.	Treatment: Acetone solvent Benzene solvent	Number of survivors 5 4	Number with benign tumors 1 —	Number with carcinoma 2 —	
Holsti and Ermala, 1955, Finland (130).	60 Albino mice (40 controls).	A. Painting of lips and oral cavity. B. 140 times in 12 months. C. Tobacco "tar".	No oral or labial changes seen in controls or experimental animals.				
Moore and Miller, 1958, U.S.A. (192).	80 Syrian Golden hamsters.	A. Material soaked onto wad and secured in cheek pouch. B. Wads replaced 8 times in 2 years. C. Smoke condensate Benz(a) pyrene.	Treatment: Controls Smoke condensate Benz(a) pyrene	Original number 30 80 20	Surviving over 1 year 23 55 16	Number tumors	Inflammation and basal cell hyperplasia 4 32 9
Guerin, 1959, France (108).	Strain IC and strain W rat.	A. Chamber inhalation of tobacco smoke. B. Daily (?). C. Up to 5½ months.	Controls Experimental	Original number 40 100	Survivors 39 68	Buccal tumors 0/39 5/68 (3/5 definite epithelioma)	

TABLE A29.—*Experimental studies concerning oral carcinogenesis (cont.)*

Author, year, country, reference	Animal and strain	A. Method. B. Frequency and/ or duration. C. Material.	Results			
Peacock et al., 1960, U.S.A. (210).	124 Syrian Golden hamsters.	A. Packing of cheek pouch. B. 1 year. C. Snuff, Tobacco, Bland material.	No tumors noted in any of the 42 animals surviving over 1 year.			
Dunham and Herrold, 1962, U.S.A. (84).	Syrian Golden hamsters.	A. Packing of cheek pouch. B. Normal lifespan or 5-30 months. C. Betel quid ingredients 7-12 dimethylbenz(a)- anthracene (DMBA), Methylcholanthrene (MCA) in beeswax pellets.	Treatment: Betel quid DMBA and MCA	Original number 375 71	Survivors 90% over 1 year 56/71 over 5-30 months	Hyperplasia and/or in- flammation 19 — 23/56
Moore and Christo- pherson, 1962, U.S.A. (191).	Albino hamster exteriorized oral pouch.	A. Painting oral mucosa. B. 3 per week for 683 days. C. Cigarette smoke condensate. DMBA in 0.5% petrolatum.	Treatment: Controls Smoke condensate DMBA		Animals with lesions (time) 0/18 (at 392 days). 0/20 (at 337 days) (10 showed hyper- keratosis). 14/21 microscopic cancers (at 90 days) (invasive squamous cancer originating in the skin at the edge of the pouch).	
Salley, 1963, U.S.A. (239).	CAF ₁ strain mice.	A. Ultraviolet light exposure to and painting of lips. B. 3 per week for 98 weeks. C. B(a)P in acetone Cigarette smoke UV light.	Treatment: Ultraviolet light and cigarette smoke B(a)P and UV light UV light B(a)P	Number 40 40 40 40	Duration weeks 94 48 94 45	Tumors — — — —

TABLE A29.—*Experimental studies concerning oral carcinogenesis (cont.)*

Author, year, country, reference	Animal and strain	A. Method. B. Frequency and/ or duration. C. Material.	Results			
			Original Number	Survivors	Duration	Lesions
	Hamsters	A. Application to cheek pouch. B. See results. C. See results.	Treatment: Cigarettes 5 per week	70	55	64
			DMBA once	13	6	128
			Croton oil 3 per week	10	10	30
			DMBA once and cigarettes 5 per week	30	28	81
			DMBA once then croton oil 5 per week	29	27	81
Bock et al., 1964, U.S.A. (30).	ICR Swiss mice.	A. Painting mouse skin. B. See results 36 weeks. C. Various extracts of unburned tobacco DMBA.	Treatment: DMBA once then: Acetone benzene extract		2.5	16/7
			Concentrated Ba(OH) ₂ extract		0.5	18/8
			Diluted Ba(OH) ₂ extract		0.5	6/2
			DMBA only		—	—
			Acetone benzene extract		2.5	—
			Concentrated Ba(OH) ₂ extract		0.5	—
			Diluted Ba(OH) ₂ extract		0.5	—
			None		—	—
						Number tumors/ number mice with tumors (small papillomas)

TABLE A29.—Experimental studies concerning oral carcinogenesis (cont.)

Author, year, country, reference	Animal and strain	A. Method. B. Frequency and/ or duration. C. Material.	Results					
						Original number	Percent at 18 months with	
Protzel et al., 1964, U.S.A. (213).	Swiss Webster mice with some having liver damage in- duced either by CCl ₄ or ethyl alcohol.	A. Swabbing of labial mucosa. B. Up to 18 months. C. B(a)P in acetone.	Alcohol and CCl ₄ treated	40	74	46	Papillomas	Cancer
			Alcohol treated	40	84	50		
			CCl ₄ treated	40	90	40		
			No toxin	40	42	15		
Reddy and Anguli, 1967, India (219).	Swiss female mice.	A. Intravaginal instillation. B. Daily for 324-380 days. C. "Pan" mixture of areca nuts, lime, and chewing tobacco.	Original number	60	Survivors	40	Lesions	
							3/40 raised papillomatous malignant growths	
							4/40 possible carcinoma- <i>in situ</i> .	
Elzay, 1969, U.S.A. (90).	Syrian Golden hamsters.	A. Application to cheek pouch. B. Daily for 200 days. C. See results.	Treatment:	Original number	Mortality rate	Number animals	Percent with tumors	Percent with cancer
			DMBA Alcohol Smoke	29	41.0	17	100.0	50.0
			DMBA Alcohol	.....	29	66.0	10	60.0
			DMBA	.....	29	42.0	14	100.0
			DMBA	.....	29	48.0	15	100.0
			.....	Alcohol	Smoke	29	42.0	14
			.....	.....	Smoke	29	42.0	14

TABLE A31.—Summary of methods used in retrospective studies of tobacco use and cancer of the esophagus

Author, year, country, reference	Sex	Number	Cases		Controls		Collection of data
			Method of selection	Number	Method of selection	Number	
Sadowsky et al., 1953, U.S.A. (232).	M.	104	White patients admitted during 1938-48 to selected hospitals in New York City, Missouri, New Orleans, and Chicago.	615	White patients with illnesses other than cancer admitted to same group of hospitals during same period.		Obtained by 4 specially trained lay interviewers. 242 records out of a total of 2,847 excluded because of incomplete or questionable smoking histories.
Sanghvi et al., 1955, India (241).	M.	73	Consecutive clinic admissions to Tata memorial Hospital, Bombay.	288	Consecutive clinic admissions of patients without cancer.	107	Consecutive admissions of patients with cancers other than intraoral or esophagus.
Wynder et al., 1957, Sweden (322).	M. F.	39 35	Patients admitted to Radiumhemmet, Stockholm, during 1952-55.	115 156	Patients admitted to same hospital with cancer of skin, head and neck region other than squamous cell cancer, leukemia, colon, and other sites. No matching.		
Staszewski, 1960, Poland (260).	M.	24	Patients admitted to Oncological Institute during 1957-59.	912	Other patients sent to Institute with symptoms probably not etiologically connected either with smoking or with diseases of esophagus, stomach or duodenum.		No details given on method of data collection. No age adjustment or matching. Average age of cancer patients, 60.5; controls, 58.